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CONFIRMATION NO. 4337

SERIAL NUMBER 10/695,245	FILING DATE 10/27/2003 RULE	CLASS 324	GROUP ART UNIT 2829	ATTORNEY DOCKET NO. 6427-65559
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APPLICANTS

James F. Orsillo, Bend, OR;

** CONTINUING DATA *****

This appln claims benefit of 60/454,102 03/11/2003
 and is a CIP of 10/107,052 03/28/2002
 which is a DIV of 09/662,735 09/15/2000 PAT 6,408,500
 This application 10/695,245
 is a CIP of 10/432,808 05/23/2003
 which is a 371 of PCT/US01/28669 09/14/2001
 This application 10/695,245
 is a CIP of 10/439,595 05/16/2003
 which claims benefit of 60/397,167 07/18/2002
 and claims benefit of 60/454,102 03/11/2003

Verified

J.M.H.

** FOREIGN APPLICATIONS *****

N/A J.M.H.

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

** 08/11/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged <i>J.M.H.</i> Allowance Examiner's Signature Initials	OR	6	43	6

ADDRESS

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TITLE

Apparatus and method for use in testing a semiconductor wafer

FILING FEE RECEIVED 721	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<table border="1"><tr><td><input type="checkbox"/> All Fees</td></tr><tr><td><input type="checkbox"/> 1.16 Fees (Filing)</td></tr><tr><td><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)</td></tr><tr><td><input type="checkbox"/> 1.18 Fees (Issue)</td></tr><tr><td><input type="checkbox"/> Other _____</td></tr><tr><td><input type="checkbox"/> Credit</td></tr></table>	<input type="checkbox"/> All Fees	<input type="checkbox"/> 1.16 Fees (Filing)	<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)	<input type="checkbox"/> 1.18 Fees (Issue)	<input type="checkbox"/> Other _____	<input type="checkbox"/> Credit
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